

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DMFI PAC

ADDRESS (number and street)

1023 31st Street, NW

Suite 530

Washington

DC

20007

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00710848

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

06

14

2022

in the
State of

NV

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

05

19

2022

through

M M /

D D /

Y Y Y Y Y Y

05

25

2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Petterson, Jay, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Petterson, Jay, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

06

02

2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DMFI PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
05		19		2022

To:

M M	/	D D	/	Y Y Y Y Y
05		25		2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2022</td></tr></table>	Y	Y	Y	Y	Y	2022						<table><tr><td colspan="5">573277.55</td></tr></table>	573277.55				
Y	Y	Y	Y	Y													
2022																	
573277.55																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">1190208.79</td></tr></table>	1190208.79															
1190208.79																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">262606.00</td></tr></table>	262606.00					<table><tr><td colspan="5">4195541.73</td></tr></table>	4195541.73									
262606.00																	
4195541.73																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">1452814.79</td></tr></table>	1452814.79					<table><tr><td colspan="5">4768819.28</td></tr></table>	4768819.28									
1452814.79																	
4768819.28																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">332997.06</td></tr></table>	332997.06					<table><tr><td colspan="5">3649001.55</td></tr></table>	3649001.55									
332997.06																	
3649001.55																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">1119817.73</td></tr></table>	1119817.73					<table><tr><td colspan="5">1119817.73</td></tr></table>	1119817.73									
1119817.73																	
1119817.73																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">517516.08</td></tr></table>	517516.08															
517516.08																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

DMFI PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	2

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7032.00

123682.00

(ii) Unitemized

574.00

10159.22

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

7606.00

133841.22

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

7606.00

133841.22

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

255000.00

4061700.51

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

262606.00

4195541.73

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

262606.00

4195541.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	300.51	35785.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	300.51	35785.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	77000.00
24. Independent Expenditures (use Schedule E)	210112.45	3133975.60
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	122584.10	402240.71
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	332997.06	3649001.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	332997.06	3649001.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7606.00	133841.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7606.00	133841.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	300.51	35785.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	300.51	35785.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Allen, Morris, , ,

Mailing Address 2161 Theresa St

City
Mendota Heights

State
MN

Zip Code
55120-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Beth Jacob Congregation

Occupation (for Individual)

Rabbi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 18 / 2022

Transaction ID : VVC9XS0MBB7

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ACTBLUE

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

05 / 22 / 2022

Transaction ID : VVC9XS0MBB7E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beck, Edward, , ,

Mailing Address 1357 Old Ford Rd

City
Huntingdon Valley

State
PA

Zip Code
19006-8105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

05 / 20 / 2022

Transaction ID : VVC9XS0MBA9

Amount of Each Receipt this Period

360.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

610.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ACTBLUE

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2022

Transaction ID : VVC9XS0MBA9E

Amount of Each Receipt this Period

360.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cooper, Todd, , ,

Mailing Address 40 Cove Rd

City
Oyster Bay

State
NY

Zip Code
11771-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ripco Real Estate

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2022

Transaction ID : VVC9XS0MAV0

Amount of Each Receipt this Period

5000.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ACTBLUE

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2022

Transaction ID : VVC9XS0MAV0E

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Levitt, Randall, , ,

Mailing Address 4901 Hampden Ln
Unit 604

City
Bethesda

State
MD

Zip Code
20814-7919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nellis Corp

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2022

Transaction ID : VVC9XS0MAT2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2022

Transaction ID : VVC9XS0MAT2E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pildes, Lisa, , ,

Mailing Address 2327 Park Pl
1

City

Evanston

State

IL

Zip Code

60201-1430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Property Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2022

Transaction ID : VVC9XS0MB26

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

1250.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C**

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2022

Transaction ID : VVC9XSOMB26E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Younger, Joel, , ,

Mailing Address 420 Semple Ave

City
AptosState
CAZip Code
95003-5239FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2022

Transaction ID : VVC9XSOMB67

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C**

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2022

Transaction ID : VVC9XSOMB67E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zwick, Martin, , ,

Mailing Address 6816 SE 19Th Ave

City
Portland

State
OR

Zip Code
97202-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Portland State University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.00

Date of Receipt

MM / DD / YYYY
05 / 18 / 2022

Transaction ID : VVC9XS0MAW8

Amount of Each Receipt this Period

36.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

MM / DD / YYYY
05 / 22 / 2022

Transaction ID : VVC9XS0MAW8E

Amount of Each Receipt this Period

36.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zwick, Martin, , ,

Mailing Address 6816 SE 19Th Ave

City

Portland

State
OR

Zip Code
97202-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Portland State University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

752.00

Date of Receipt

MM / DD / YYYY
05 / 20 / 2022

Transaction ID : VVC9XS0MAX6

Amount of Each Receipt this Period

36.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

7606.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2022

Transaction ID : VVC9XS0MAX6E

Amount of Each Receipt this Period

36.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

7032.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 22

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bankman-Fried, Samuel, , ,

Mailing Address 27 Veridian Corporate Center
Western Rd

City Nassau Bahamas State ZZ Zip Code 00000

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
FTX Trading Limited

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 25 / 2022

Transaction ID : VVC9XS0P3M7

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Non-Contribution Account. Attested U.S.
Citizen/Permanent Resident

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cooper, Todd, , ,

Mailing Address 40 Cove Rd

City Oyster Bay State NY Zip Code 11771-2408

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
Ripco Real Estate

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2022

Transaction ID : VVC9XS0MBE0

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

255000.00

255000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031Purpose of Disbursement
Credit Card Fees

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2022

FEC Identification Number

C**Transaction ID : VVBANAR8E**

Amount of Each Disbursement this Period

300.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

300.51

300.51

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 22

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2022

FEC Identification Number

C Transaction ID : VVBANAR8E

Amount of Each Disbursement this Period

197.50

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Trilogy Interactive, LLC

Mailing Address PO Box 4177

City
Mountain View

State
CA

Zip Code
94040-0177

Purpose of Disbursement
Pre-Payment of Digital Advertising Buy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 23 / 2022

FEC Identification Number

C Transaction ID : VVBANAR8M

Amount of Each Disbursement this Period

13600.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Trilogy Interactive, LLC

Mailing Address PO Box 4177

City
Mountain View

State
CA

Zip Code
94040-0177

Purpose of Disbursement
Pre-Payment of Digital Advertising Buy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 25 / 2022

FEC Identification Number

C Transaction ID : VVBANAR8M

Amount of Each Disbursement this Period

92514.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106311.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name (Last, First, Middle Initial)

A. Utrecht, Kleinfeld, Fiori, Clark PartnersMailing Address 1634 I St NW
Ste 1250City
WashingtonState
DCZip Code
20006-4096Purpose of Disbursement
Legal Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
05		25		2022

FEC Identification Number

C**Transaction ID : VVBANAR8M**

Amount of Each Disbursement this Period

16272.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16272.60

122584.10

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 22

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

DMFI PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GPS Impact

Nature of Debt (Purpose):

T.V. Advertising Buy

Mailing Address 112 SE 4Th St
Unit 202City
Des MoinesState
IAZip Code
50309-4858

Outstanding Balance Beginning This Period

0.00

Transaction ID : **VV9C59HDA63**

Amount Incurred This Period

400000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hamburger Group Creative

Nature of Debt (Purpose):

Digital Advertising Buy

Mailing Address 5614 Connecticut Ave NW

City
WashingtonState
DCZip Code
20015-2604

Outstanding Balance Beginning This Period

0.00

Transaction ID : **VV9C59HDA89**

Amount Incurred This Period

20000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hamburger Group Creative

Nature of Debt (Purpose):

Digital Advertising Production (Estimate)

Mailing Address 5614 Connecticut Ave NW

City
WashingtonState
DCZip Code
20015-2604

Outstanding Balance Beginning This Period

0.00

Transaction ID : **VV9C59HDA97**

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

425000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 22

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

DMFI PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

J&Z StrategiesNature of Debt (Purpose):
Digital Advertising BuyMailing Address 5419 Hollywood Blvd
Ste C135City
Los AngelesState
CAZip Code
90027-3480

Outstanding Balance Beginning This Period

0.00

Transaction ID : VV9C59HDA55

Amount Incurred This Period

58500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sixth Street StrategiesNature of Debt (Purpose):
Direct Mail Advertising

Mailing Address 320 Broadway

City
MethuenState
MAZip Code
01844-6807

Outstanding Balance Beginning This Period

0.00

Transaction ID : VV9C59HDA71

Amount Incurred This Period

34016.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

34016.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

92516.08

2) **TOTALS** This Period (last page this line number only)..... ►

517516.08

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

517516.08

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DMFI PAC				FEC IDENTIFICATION NUMBER ▼ C C00710848	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee J&Z Strategies Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 24 / 2022		
Mailing Address 5419 Hollywood Blvd Ste C135			Amount 58830.00		
City Los Angeles	State CA	Zip Code 90027-3480	Transaction ID : VVBANAR8EP8 Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2022		
Purpose of Expenditure Digital Advertising Buy		Category/ Type 			
Name of Federal Candidate: GARCIA, CRISTINA, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 42 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 65680.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee J&Z Strategies Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 24 / 2022		
Mailing Address 5419 Hollywood Blvd Ste C135			Amount 6850.00		
City Los Angeles	State CA	Zip Code 90027-3480	Transaction ID : VVBANAR8EQ5 Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2022		
Purpose of Expenditure Digital Advertising Production		Category/ Type 			
Name of Federal Candidate: GARCIA, CRISTINA, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 42 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 65680.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			65680.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Petterson, Jay, , ,</u> 		[Electronically Filed]		Date MM / DD / YYYY 06 / 02 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DMFI PAC		FEC IDENTIFICATION NUMBER ▼ C C00710848	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group, Inc. Non-Contribution Account		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 26 / 2022	
Mailing Address 29 Ancell St		Amount 56741.75	
City Alexandria	State VA	Zip Code 22305-2502	Transaction ID : VVBANAR8EV7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 25 / 2022
Purpose of Expenditure Direct Mail Advertising		Category/ Type 	
Name of Federal Candidate: LEE, DANIEL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 37 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 172786.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group, Inc. Non-Contribution Account		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2022	
Mailing Address 29 Ancell St		Amount 27693.85	
City Alexandria	State VA	Zip Code 22305-2502	Transaction ID : VVBANAR8GT3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 25 / 2022
Purpose of Expenditure Direct Mail Advertising		Category/ Type 	
Name of Federal Candidate: KAMLAGER, SYDNEY, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 37 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 172786.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		84435.60	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Petterson, Jay, , ,</i>		Date M M / D D / Y Y Y Y Y Y 06 / 02 / 2022	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DMFI PAC			FEC IDENTIFICATION NUMBER ▼ C C00710848	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group, Inc. Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2022	
Mailing Address 29 Ancell St			Amount 27693.85	
City Alexandria	State VA	Zip Code 22305-2502	Transaction ID : VVBANAR8GV1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 25 / 2022	
Purpose of Expenditure Direct Mail Advertising		Category/ Type 		
Name of Federal Candidate: LEE, DANIEL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 37 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 172786.38			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Trilogy Interactive, LLC Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 01 / 2022	
Mailing Address PO Box 4177			Amount 11151.50	
City Mountain View	State CA	Zip Code 94040-0177	Transaction ID : VVBANAR8M22 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 25 / 2022	
Purpose of Expenditure Digital Advertising Buy		Category/ Type 		
Name of Federal Candidate: VILELA, AMY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 32303.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			38845.35	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Petterson, Jay, , , Signature			Date M M / D D / Y Y Y Y Y Y 06 / 02 / 2022	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DMFI PAC			FEC IDENTIFICATION NUMBER ▼ C C00710848	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>				
Full Name of Payee <input type="checkbox"/> Memo Item Trilogy Interactive, LLC Non-Contribution Account			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 4177			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11151.50</div>	
City Mountain View	State CA	Zip Code 94040-0177	Transaction ID : VVBANAR8MB3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Buy		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: TITUS, DINA, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">32303.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Trilogy Interactive, LLC Non-Contribution Account			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 4177			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>	
City Mountain View	State CA	Zip Code 94040-0177	Transaction ID : VVBANAR8MC1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: VILELA, AMY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">32303.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">16151.50</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Petterson, Jay, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) DMFI PAC			FEC IDENTIFICATION NUMBER ▼ C C00710848		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y		
Full Name of Payee Trilogy Interactive, LLC Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 01 / 2022		
Mailing Address PO Box 4177			Amount 5000.00		
City Mountain View	State CA	Zip Code 94040-0177	Transaction ID : VVBANAR8MD9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 25 / 2022		
Purpose of Expenditure Digital Advertising Production		Category/ Type 			
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought		32303.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure		Category/ Type 			
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u> </u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u> </u>		
Calendar Year-To-Date Per Election for Office Sought		 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			5000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			210112.45		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Peterson, Jay, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 02 / 2022	